

THE PHYSICIAN'S Bookshelf

CARDIAC EMERGENCIES AND RELATED DISOR-DERS—Their Mechanism, Recognition and Management—Harold D. Levine, M.D., Senior Associate in Medicine, Peter Bent Brigham Hospital, Boston, Mass.; Assistant Clinical Professor of Medicine, Harvard Medical School. Landsberger Medical Books, Inc., 51 East 42nd Street, New York, N. Y., 1960. 381 pages, \$12.00.

This monograph by Dr. Levine is a sound attempt to present a practical account of the treatment of the broad field of cardiac emergencies. It is the outgrowth of seminars presented to senior students over a period of years and therefore is a general clinical account rather than a discussion of the subject in depth or a presentation of recent advances. The author has had some difficulty in separating the emergency from the long-term treatment, at times considering long-term treatment as part of the emergency, such as anticoagulant therapy and in others omitting long-term considerations such as the prevention of recurrent cardiac arrhythmia.

Although an effort has been made to explain the mechanism of the various disturbances, this aspect of the subject has not been considered in depth. Therapy has been discussed in a conventional, practical fashion although at times the author fails to be sufficiently precise in terms of what he recommends as the choice among a variety of potential treatments. For example under paroxysmal atrial tachycardia he uses such phrases as "another choice of medication . . . digitalis . . .," or "the medical literature also reports the use of calcium gluconate," or "one may use various medicinal forms of treatment, probably the simplest and most effective is the subcutaneous injection of 0.5 to 1.0 or even 2.0 mgms. of prostigmine. . . ." The reader is left in doubt as to how the author actually treats the arrhythmia and what he does if the particular treatment that he uses is not effective. It would be most helpful if the author clearly stated the measures which in his own experience were found to be reliable rather than to list all the various methods that have been used.

The discussion of digitalis toxicity is the subject of a special chapter and is most helpful. The reviewer would have liked to have seen a special section on the problem which often presents a real emergency, of when an arrhythmia is the result of excessive digitalis and when it is due to inadequate digitalis. In addition the problem of hypokalemic alkalosis could well be introduced into the discussion of electrolyte disturbances in the chapter on "refractory" congestive heart failure and the distinction between sodium depletion and sodium dilution be more clearly defined. A notable omission in the book concerns emergency treatment of hypertension or a vascular emergency.

In addition to the usual cardiac emergencies, the author has chapters on unusual and noncardiac causes of chest pain, pulmonary embolism, syncope, and cardiac arrest and resuscitation. Each chapter has pertinent references which is a distinct advantage in a monograph of this sort. The book in general can be recommended as a good account of contemporary thought, but in view of the high price (\$12) one wonders whether the reader would not profit more from purchasing one of the standard texts on heart disease.

TREATMENT OF CANCER AND ALLIED DISEASES—SECOND EDITION—Tumors of the Breast, Chest and Esophagus, Volume IV—By Sixty-seven Authors, George T. Pack, M.D., F.A.C.S., and Irving M. Ariel, M.D., F.A.C.S., editors. Paul B. Hoeber, Inc., Medical Division of Harper & Brothers, 49 East Thirty-third Street, New York 16, N. Y., 1960. 667 pages, \$30.00.

The precedent created by the first three volumes of the second edition of this nine-part work is ably continued. The excellent format, clear illustrations and legible text of the earlier volumes are maintained.

In a section on tumors of the breast, the senior editors reprint the well-known curve of Nathanson and Welch dealing with survival for untreated cases of breast cancer "a natural yardstick for measuring results of therapy." They fail to point out that these survival figures are estimated from the time of recognition or self diagnosis by the patient, and are not comparable with treated results, since the latter usually are and always should be dated from time of definitive treatment. A curve, corrected by the reviewer to allow for the usual delay of about six months in treated cases has been published (American Journal of Roentgenology, December 1954, page 938).

Since the authors then publish several tables and curves dealing with relative survival data from large centers such as the Mayo Clinic, it would be desirable that the next edition carry an absolute survival rate for treated cases of cancer of the breast from a representative group of centers, drawn to scale with the existing one for untreated cases.

The place of so-called radical mastectomy receives understandable emphasis in this worthy surgical text. But it is difficult to understand why the extended supraradical mastectomy (with supraclavicular and mediastinal excision) should merit a whole chapter. Halstead tried and discarded this mutilating procedure more than half a century ago, and it is questionable whether 11 pages of text and 10 beautiful illustrations should be wasted on it.

The place of orthovoltage radiation therapy in the treatment of breast cancer is ably outlined by Stenstrom and Stone. But the senior editors have appended to this a rather futile method of irradiating the internal mammary vessels which cannot be recommended, especially in the light of Haagensen's work showing that when the internal mammary chain is involved, systemic spread has usually occurred.

The valuable work of the modern Edinburgh school headed by a distinguished group of Scottish surgeons and the radiotherapist McWhirter receives scant mention. Since the absolute results by this method of treatment of carcinoma of the breast equal if they do not surpass the comparable results of "radical" mastectomy, the reason for this omission is ob-